

DEJU AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 09/830966	FILING DATE
						APPLICANT(S)	
CLAIMS							
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
1		1					
2	1	1					
3	2	1					
4	1	1					
5	1	1					
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TOTAL IND.		1					
TOTAL DEP.		5					
TOTAL CLAIMS		6					

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		IND.	DEP.	IND.	DEP.	IND.	DEP.	
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* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

Barbara Campbell
National Stage Processing
(703) 305-3831